



Centers for Medicare & Medicaid Services

STATE QUALITY STRATEGY TOOL KIT FOR STATE MEDICAID AGENCIES

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Division of Quality, Evaluation and Health Outcomes
Centers for Medicaid and State Operations**

Attachments:

- 1) State Medicaid Quality Strategy Overview**
- 2) Table A – Recommended Structure of a State Quality Strategy**
- 3) Table B – Recommended QI Components of a State Quality Strategy**
- 4) Table C – Listing of Web-based Resources for Developing or Enhancing Quality Strategies**
- 5) Center for State Medicaid Operations Quality Initiative – released July 2006**

PROLOGUE:

Each State that enters into one or more managed care organization (MCO) or Pre-paid Inpatient Health Plan (PIHP) contracts must develop a quality strategy.¹

This strategy needs to address:

1. How the State will assess the quality of care delivered through the MCO/PIHP/HIO contracts, and
2. How the State, based on its assessment, will improve the quality of care delivered through the MCO/PIHP/HIO contracts

The following sections describe the four components that CMS would expect to be addressed in a State's written quality strategy:

- Introduction/Overview
- Assessment
- Improvement
- Review of Quality Strategy

I. Introduction

- A. This section should include general information about the State's decision to contract with MCO(s)/PIHP(s)/HIO(s). For example, in deciding to use a managed care system, was the State primarily attempting to address issues of cost, quality of care, and/or access? The State should describe how it believes that the use of a managed care system will impact the quality of care delivered in the Medicaid program.
- B. Given the State's reasons for implementing or continuing to implement a managed care delivery system, quantifiable performance driven objectives should be established for demonstrating success or challenges in meeting intended outcomes. CMS and other healthcare policy stakeholders are interested in knowing how the State plans to maximize opportunities in the managed care system to improve care. These objectives should reflect the State's priorities and areas of concern for the population covered by the MCO/PIHP/HIO contracts. Examples include:

- *The State will demonstrate a 10% improvement in childhood immunization rates over the next three years.*
- *"The State will demonstrate a 10% improvement in the controlled HgA1c level of Medicaid managed care beneficiaries with diabetes".*

¹ Code of Federal Regulations 438.202
Medicaid Quality Strategy Toolkit

- *The State will demonstrate a 10% improvement in the rate of pregnant women receiving prenatal care*
- *The State will demonstrate improvement in the coordination of care for beneficiaries with chronic conditions within three years of implementing a Pay-For-Performance Incentive Program.*
- *Through expansion of the primary care network, as evidenced by geographical reporting, the State will demonstrate a 5% improvement in enrollee access to Primary Care.*

When possible, overarching principles with other State programs should be emphasized to demonstrate a comprehensive, efficient state-wide strategy.

II. Assessment

As required by the Code of Federal Regulations (CFR) 438.202(d), this section should describe how the State will assess how well the managed care program is meeting the objectives outlined in the Introduction:

A. The quality and appropriateness of care and services delivered to enrollees

- *include a discussion of how data on race, ethnicity, and primary language is communicated to MCOs/PIHPs/HIOs AND how the State expects that the information is used (CFR 438.204(b)(2))*
- *include a discussion on the External Quality Review (EQR) technical report and how the State uses the EQR technical report*
- *include a discussion on any clinical standards/guidelines that the State has established*

B. The level of contract compliance of MCO(s)/PIHP(s)

- *As required by CFR 438.204(g), include a discussion of the standards that the State has established in the MCO/PIHP/HIO contracts for:*
 - a. access to care;*
 - b. structure and operations;*
 - c. quality measurement and improvement*

These standards should relate to the overall objectives listed in the introduction.

As required by CFR 438.202(c), describe how the State determines whether or not the MCOs/PIHPs/HIOs are in compliance with the contract requirements. Some examples of the mechanisms that can be used for collecting information on evaluating the progress of meeting each Strategy Objective are:

Surveys

HEDIS results

MCO/PIHP/HIO Compliance rates with established EQR Standards

Report Cards or Profiles

Required MCO/PIHP reporting of Performance Measures

Required MCO/PIHP/HIO reporting on Performance Improvement Projects

Optional EQR Activity Reporting

C. The level of impact from use of available or evolving Health Information Technology

- *As required by CFR 438.204(f), include discussion of challenges or opportunities with data collection systems such as: registries, claims or enrollment reporting systems, pay-for-performance tracking or profiling systems, electronic health record information exchange, regional Health Information Technology collaborative, telemedicine initiative, etc.*

III. Improvement:

This section should:

- A. Describe how the State, based on the results of the assessment activities, will attempt to improve the quality of care delivered by the MCOs/PIHPs through interventions as:

- *Cross-State Agency Collaborative/Initiative*
- *Performance Improvement Project(s)*
- *Pay-for-Performance incentives*
- *Value-based Purchasing initiatives*
- *MCO sanctions*
- *Changes in benefits for program participants*
- *Information System or Electronic Health Record initiatives*
- *Provider network expansion*
- *Implementation of optional EQRO Activities*

- B. Include a discussion on the State's progress in meeting the State's objectives described in the Introduction.
- *For example, if the State has established an objective for "10% improvement over the next three years in the number of MCOs that demonstrate improvement in a Performance Improvement Project to improve the controlled HgA1c level of Medicaid beneficiaries with diabetes", how will the State assess whether or not this objective has been met?*
- C. In the initial quality strategy, a State may decide to simply describe the process they intend to follow to embark on quality improvement. As results from the assessment activities are produced, it is likely that the State will be able to more clearly define steps to quality improvement.

IV. Review of Quality Strategy:

This section should describe how the State reviews the effectiveness of the quality strategy and revises it accordingly.

- A. Include a timeline planned for the frequency of Strategy assessments
- B. Include a timeline planned for reporting of Strategy updates to CMS
- C. As the Quality Strategy evolves, document challenges and successes that result in changes to the Strategy (Strategy Effectiveness), including interim performance results as available for each strategy objective.

V. Achievements and Opportunities:

Ongoing assessment of the State's Medicaid Managed Care Quality Strategy provides the opportunity for the State to highlight its successes and share what has been found effective in improving health care quality and/or service.

Additionally, it is not expected that all strategy objectives can be met. Hence, sharing experiences that encountered challenges and whether the responses to those challenges were effective is important information to share nationally.

VI. Appendix of Technical Documents for Assistance

- A. Summary of the Recommended Structure of a State Quality Strategy – Table A
- B. Summary of the Recommended QI Components of a State Quality Strategy – Table B
- C. Listing of Web-based Resources for Developing or Enhancing Quality Strategies – Table C

Table A

**RECOMMENDED STRUCTURE OF A QUALITY ASSESSMENT AND
PERFORMANCE IMPROVEMENT STRATEGY**

QUALITY STRATEGY DOCUMENT SECTION	CONTENT ADDRESSES:
Introduction	<ul style="list-style-type: none"> • History of the State’s Medicaid Managed Care Programs • The Strategy’s objectives, including performance targets
Assessment	<ul style="list-style-type: none"> • How will the State assess: <ul style="list-style-type: none"> • Quality and appropriateness of care and services delivered to enrollees • Level of contract and regulatory compliance of MCOs/PIHPs • Level of impact of Health Information Technology changes/evolution
Improvement	<ul style="list-style-type: none"> • What interventions are planned to improve the quality of care to be delivered to enrollees?
Strategy Review – Outcomes and Effectiveness	<ul style="list-style-type: none"> • Frequency of assessments of Strategy performance • Frequency of reporting Strategy updates to CMS • Summary of evaluation methods and performance targets

Table B

**COMPONENTS TO ADDRESS IN A QUALITY ASSESSMENT AND
PERFORMANCE IMPROVEMENT STRATEGY**

Quality Strategy Elements and Key Questions	Correlates to Structure Section	Potential Sources Of Information	Additional Information
Overview	I.A	<ul style="list-style-type: none"> • BBA • MCO/PIHP contracting and turnover experience • Population description / changes • Driver for implementation of Managed Care 	<ul style="list-style-type: none"> • Include history of managed care program • Process to get public input on strategy • How often will strategy be evaluated and revised?
Strategy Objectives	I.B	<ul style="list-style-type: none"> • Results from Prior program experience • Results from Performance Measurement/EQRO or other Quality Related Reporting 	<ul style="list-style-type: none"> • Include measurable target (e.g. % increase or decrease) • May directly reference an intervention/ initiative driving the objective
Quality and Appropriateness of Care How is the race, ethnicity, and primary language spoken of each enrollee identified and transmitted to MCOs? How is EQRO Technical Report used to evaluate quality and appropriateness of care? Does the State require specific performance measures or performance improvement projects based on Strategy Objectives, and if so – what are the performance standards? Are any clinical guidelines provided to managed care plans?	II.A	<ul style="list-style-type: none"> • MMIS data • EQR Technical Report and recommendations • MCO required data reporting • Report Card efforts • Pay for Performance • Value Based Purchasing 	<ul style="list-style-type: none"> • Include state standards for quality measurement and improvement • Include any standards that will be reviewed using private or Medicare accrediting information

Quality Strategy Elements and Key Questions	Correlates to Structure Section	Potential Sources Of Information	Additional Information
<p>MCO/PIHP Requirements</p> <p>What requirements has the State established for its MCOs/PIHPs/HIOs in the following domains:</p> <ul style="list-style-type: none"> • Access to Care • Structure and Operations • Quality measurement and improvement 	II.B.	<ul style="list-style-type: none"> • Performance incentive program • Encounter Data System • MMIS data • Risk-share reporting • NCQA information • Member Satisfaction Survey • Complaint, grievance, and appeals reporting • EQR activities • Special studies • Contract compliance review • Provider network reporting 	<ul style="list-style-type: none"> • Include availability of services, coordination and continuity of care and any utilization review requirements managed care plans must meet • Include required enrollee information, disenrollment; grievance/appeals, and confidentiality requirements that managed care plans must meet • Include encounter data requirements • Include specific performance measures and/or performance improvement projects • Include practice guidelines if required
<p>MCO/PIHP Contractual Compliance</p> <p>What contract provisions hold the MCO/PIHP/HIO accountable for meeting the standards outlined in preceding sections?</p> <p>What monitoring mechanisms does the State have in place to provide oversight to MCO/PIHP/HIO?</p>	II.B	<ul style="list-style-type: none"> • MCO/PIHP Contract • State-specific Statutes if applicable • MCO/PIHP Performance incentive program • Provider incentive program • NCQA information • Complaint, grievance and appeals reporting • EQR studies • Special studies • CFR Part 438 – Subpart D 	<ul style="list-style-type: none"> • Include incentives and disincentives (sanctions) offered to MCOs as tool for quality • Include data reporting/analysis activities
<p>Evolution of Health Information Technology</p> <p>Is there an information system that supports initial and ongoing operation and review of the State’s quality strategy objectives and progress toward performance targets?</p>	II.C	<ul style="list-style-type: none"> • MMIS Review • Encounter Data System • NCQA information • Regional or multi-state IT collaborative • New IT contracts • Implementation/revision of registries • Needs assessments for implementation of electronic health records • Telemedicine initiatives • Provider/MCO-PIHP Profiling • EQR Technical report recommendations • CMS Quality Roadmap 	<ul style="list-style-type: none"> • Include any health information technology initiatives that will support the objectives of the strategy.

Quality Strategy Elements and Key Questions	Correlates to Structure Section	Potential Sources Of Information	Additional Information
Improvement/ Interventions How will the State implement interventions specific to each Strategic Objective? What interventions are under consideration pending baseline reporting of targeted information? What interventions are under development?	III	<ul style="list-style-type: none"> • Cross-State Agency Collaborative • Performance Improvement Project activities • Pay-for-Performance Incentives • Value-Based Purchasing incentives and or disincentives • Telemedicine • Health Information Technology Changes 	
Strategy Effectiveness What are the planned evaluations (frequency, estimated target dates)? What are the reporting requirements for MCOs/PIHPS to State and from State to CMS?	IV		<ul style="list-style-type: none"> • Consider aligning routine reporting mechanisms from MCOs/ PIHPS/EQR with planned evaluation periods
Conclusions What particular successes could be considered best practices? What ongoing challenges does the State face in improving the quality of care for Medicaid beneficiaries? What recommendations does the State make for ongoing Medicaid quality improvement activities in the State?	V	<ul style="list-style-type: none"> • Performance Improvement Project activities • Pay-for-Performance Incentives • Value-Based Purchasing incentives and or disincentives • Telemedicine • Health Information Technology Changes 	



TABLE C

State Quality Assessment and Improvement Strategic Planning Examples and Tools

States have many disparate requirements related to Medicaid quality, particularly if they have a managed care delivery system. To assure that decision makers approach their commitments in a coordinated manner and with a clear sense of overarching purpose, some states have initiated efforts to develop consolidated strategies for improving quality of care. As other states consider developing strategies to guide their own quality of care efforts, they have asked CMS for examples of strategies that have already been developed, as well as information about the approaches used by these states and other tools that might be helpful in such an endeavor.

The attached compendium provides a partial inventory of such resources. The documents listed in this table are furnished for informational purposes only. Their inclusion is not meant to imply that any document is officially endorsed by the Centers for Medicare & Medicaid Services.

State Quality Assessment and Improvement Strategic Planning Examples and Tools

Category	Resource	Contact	Date of Publication / Release	Document Website Location	Description
CMS Medicaid/SCHIP Quality Strategy	CMSO Division of Quality, Evaluation & Health Outcomes	DQEHO Director, CMS/ CMSO/ FCHPG MS: S2-01-16 7500 Security Blvd Baltimore MD 21244	August 2005	http://www.cms.hhs.gov/MedicaidSCHIPQualPrac/	CMS recently developed a Medicaid/SCHIP Quality Strategy. Key strategies include: (1) Evidenced-Based Care and Quality Measurement (2) Payment Aligned with Quality (3) Health Information Technology (4) Partnerships (5) Information Dissemination, Technical Assistance, and sharing of best practices. Please click on the link below to view the Medicaid and SCHIP Quality Strategy in its entirety.
CMS Quality Strategy Tool Kit	CMSO Division of Quality, Evaluation & Health Outcomes	DQEHO Director, CMS/ CMSO/ FCHPG MS: S2-01-16 7500 Security Blvd Baltimore MD 21244	To be available soon	To be available soon	CMS has developed several references that provide recommendations to State Medicaid Agencies for developing or revising State Medicaid Managed Care Quality Strategies, as required by Code of Federal Regulations 438.202

State Quality Assessment and Improvement Strategic Planning Examples and Tools

Category	Resource	Contact	Date of Publication / Release	Document Website Location	Description
Publicly available State Quality Strategies	Arizona Quality Assessment and Performance Improvement Strategy	Arizona Health Care Cost Containment System, Office of Special Programs, Claire Sinay, Manager (602) 417-4178.	October 2004	http://www.ahcccs.state.az.us/Publications/Reports/QualityStrategy/10_04QualityStrategy.pdf	The AHCCCS Quality Strategy is a coordinated, comprehensive, and pro-active approach to drive quality through creative initiatives, monitoring, assessment, and outcome-based performance improvement. The Quality Strategy is designed to ensure that services provided to members meet or exceed established standards for access to care, clinical quality of care, and quality of service. It is designed to identify and document issues related to those standards, and encourage improvement through incentives, or where necessary, through corrective actions.
Publicly available State Quality Strategies	California Medi-Cal Managed Care Quality Strategy	California State Department of Health, Medi-Cal Managed Care Division (916) 449-5000	2004	http://www.dhs.ca.gov/mcs/mcmcd/PDF/reports/Quality%20Strategy%20Final.pdf	The purpose of this document is to define a strategic framework for health care quality improvement for the and for the agency's contracted managed care plans. Developed in response to the Medicaid managed care final rules published June 14, 2002, the document presents MMCD's quality goals and objectives, reviews current quality policies and activities, and identifies priorities for improvement and proposed improvement strategies.

State Quality Assessment and Improvement Strategic Planning Examples and Tools

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Publicly available State Quality Strategies	<u>Colorado</u> Quality Assessment and Improvement Strategy	Colorado Department of Health Care Policy and Financing, Katie Brookler, Manager, Quality Improvement Section, (800) 221-3943 x2416	August 2003	http://www.chcpf.state.co.us/HCPF/QIBELTH/NewQIP_mainPage.asp	The Quality Strategy is a coordinated, comprehensive, and on-going effort to monitor, assess, and improve the performance of all care and services provided through the contracted managed care organizations and administrative service organizations and primary care case managers. The Quality Strategy is designed to ensure that services provided to Medicaid members meet established standards for access to care, clinical quality of care, and quality of service; to identify and document issues related to those standards; and to verify that appropriate corrective actions are taken to address those issues.
Publicly available State Quality Strategies	<u>District of Columbia</u> Continuous Quality Improvement Plan for Oversight and Assessment of Medicaid Managed Care Organizations	District of Columbia Department of Health, Medical Assistance Administration, (202) 442-5988	March 18, 2004	http://doh.dc.gov/doh/fra mes.asp?doc=/doh/lib/doh/services/medicaid/pdf/cqi_plan_01_24_05.pdf&dohNav_GID=1807	The Plan outlines and describes the quality monitoring and oversight strategies of the District's MCOs for the provision of care to Medicaid MCO enrollees. The Plan also focuses on the performance of important functions that significantly affect the health outcomes and perceptions of Medicaid MCO enrollees regarding the quality, safety, and value of services provided.

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Publicly available State Quality Strategies	Massachusetts MassHealth Managed Care Quality Strategy: 2005-2006	Massachusetts Office of Health and Human Services: 617-210-5000	2005	http://www.mass.gov/Eeo/hhs2/docs/masshealth/research/qualitystrategy-05.pdf	The MassHealth Managed Care Quality Strategy (Strategy) was developed at the direction of the Executive Office of Health and Human Services (EOHHS). The Strategy incorporates the efforts and activities of several entities that serve enrollees in the Massachusetts Medicaid Program
Publicly available State Quality Strategies	Minnesota Department of Human Services Managed Care Public Programs 2005 Quality Strategy	Robert J. Lloyd, MBA, CPHQ, Telephone: 651-431-2613 Fax: 651-431-7422 Email: Robert.lloyd@state.mn.us	November 2005	http://www.dhs.state.mn.us/main/groups/business_partners/documents/pub/dhs_id_009237.pdf	The Quality Strategy incorporates elements of current DHS/MCO Contract requirements, Minnesota HMO licensing requirements (Minnesota Statutes, Sections 62D, 62M, 62Q), and federal Medicaid Managed Care Rules and Regulations (42 CFR 438). The combination of these requirements (contract and licensing) and standards (quality assurance and performance improvement) is the core of DHS' responsibility to ensure the delivery of quality care and services in publicly funded managed health care programs. Annually, DHS assesses the quality and appropriateness of health care services, monitors and evaluates the MCO's compliance with state and federal Medicaid and Medicare managed care requirements and, when necessary, imposes corrective actions and appropriate sanctions if MCOs are not in compliance with these requirements and standards. The outcome of DHS' quality improvement activities is included the Annual Technical Report (ATR).

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Publicly available State Quality Strategies	North Carolina Quality Assessment and Improvement Strategies: Initial Strategy	North Carolina Division of Medical Assistance, Ann Rogers, Manager, Quality Management, (919) 647- 8181	December 2005	http://www.dhhs.state.nc.us/dma/ca/qa_improve_status_2005.pdf	This document describes the State's process for developing, reviewing, and revising a strategy to assure MCO compliance with Federal regulatory requirements; pertinent MCO contract language; State standards for access to care, structure, operations, quality measurement and improvement; a State monitoring and evaluation process; procedures for identifying enrollee race, ethnicity and primary language; and intermediate sanction provisions.
Publicly available State Quality Strategies	Virginia Managed Care Quality Strategy	Virginia Department of Medical Assistance Services 804-786-7933	June 2005	http://www.dmas.virginia.gov/downloads/pdfs/mc-quality_strategy_june_2005.pdf	The Quality Strategy for managed care organizations is a well-developed and systematic approach to planning, designing, monitoring, and assessing the quality and appropriateness of the MCOs' care delivery systems. The goal of the Quality Strategy is to improve the Department's ability to meet priorities and to continuously provide timely, accessible, and quality managed care services offered to Medicaid recipients by all MCOs in a consistent and ongoing manner.

State Quality Assessment and Improvement Strategic Planning Examples and Tools

Category	Resource	Contact	Date of Publication / Release	Document Website Location	Description
Publicly available State Quality Strategies – Mental Health focus	Washington – Quality Strategy Plan	DSHS Constituent Services PO Box 45130 Olympia, WA 98504-5130 1-800-737-0617 E-mail: Ask DSHS	July 2005	http://www1.dshs.wa.gov/mentalhealth/quality.shtml	The Quality Strategy is meant to be a coordinated, systematic approach to the planning, implementation and management of our quality assessment and improvement strategy. This strategy is expected to continuously and consistently monitor the appropriateness and quality of the consumer care delivery system in Prepaid Inpatient Health Plans (PIHPs) providing mental health care to eligible consumers in Washington State.

State Quality Assessment and Improvement Strategic Planning Examples and Tools

Category	Resource	Contact	Date of Publication / Release	Document Website Location	Description
State Strategic Initiatives	California - Real Lives, Real Reforms: Improving Health and Human Services	State of California, Little Hoover Commission (916) 445-2125	May 5, 2004	http://www.lhc.ca.gov/lhc_dir/173/report173.pdf	This report notes shortcomings in the extent to which numerous health and human service programs are effectively serving children, adults, and families. The Hoover Commission notes that these programs suffer from an overly complex organizational structure, perverse funding incentives, and weak oversight; that state agencies are unable to properly oversee these programs; that public funds are not managed efficiently nor focused on outcomes; and that the focus of public agencies on oversight does not result in improved performance. The Commission recommends a restructuring of state operations, realignment of state and local roles and responsibilities, more streamlined funding, enhanced accountability, greater focus on quality improvement, more program control at the county level, and greater management access to reliable information on quality improvement.

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State Strategic Initiatives	Rhode Island - Toward an Organized, Ideal System of Care for Rhode Island's Children, Youth, and Families	Rhode Island Department of Children, Youth, and Families System of Care Task Force (401) 528-3502	April 8, 2002	http://www.dcyf.ri.gov/docs/care_tsk_force.pdf	This report proposes a system that builds on the strengths of families through the most effective use of finite state resources. The proposed system is a strategic instrument for moving the state toward the goals of having all children entering school ready to learn; having all youth leaving school ready to lead productive lives; having all children and youth safe in their homes, neighborhoods, and schools; and having all children living in families that are self-sufficient, yet interdependent.
State Strategic Initiatives	Rhode Island - Health Indicator System for Rhode Islanders on Medicaid: An Effective Model to Measure Unmet Health Care Needs and Evaluate Program Incentives	Rhode Island Department of Human Services, John Young Associate Director Health Care Quality, Financing and Purchasing (401) 462-3575	April 2005	http://www.chcs.org/publications3960/publications_show.htm?doc_id=274656	The Rhode Island Department of Human Services developed and implemented a Health Indicator System to monitor and evaluate health services and outcomes. This Center for Health Care Strategies Resource Paper outlines how the state applied this comprehensive performance measurement system to design and evaluate its ongoing program initiatives. For the past decade, the state has tracked several health indicators, including prenatal care, maternal smoking, infant mortality, teen repeat birth rate, and mental health hospitalizations, and these results are included in this report.

State Quality Assessment and Improvement Strategic Planning Examples and Tools

Category	Resource	Contact	Date of Publication / Release	Document Website Location	Description
State Strategic Initiatives	Alaska - Managing For Results - State Initiatives	National Governors Association Center for Best Practices, John Thomasian, Director (202) 624-5300	July 15, 2001	http://www.nga.org/portal/site/nga/menuitem.9123e83a1f6786440ddcbeeb501010a0/?vgnextoid=5a01303cb0b32010VgnVCM1000001a01010aRCRD State site: http://www.hss.state.ak.us/publications/buildingblocks.pdf	Alaska is engaged in an effort to improve the health and well-being of the state's young children, prenatal through age 8. The effort includes creating a comprehensive collaborative initiative to ensure that the Departments of Education and Early Development and Health and Social Services are addressing the critical outcomes and strategies that will support and improve the lives of Alaska's children and families and gauge the state's progress. Building Blocks is the initial state document that serves as the framework of this effort.
State Strategic Initiatives	California - Managing For Results - State Initiatives	National Governors Association Center for Best Practices, John Thomasian, Director (202) 624-5300	July 15, 2001	http://www.nga.org/portal/site/nga/menuitem.9123e83a1f6786440ddcbeeb501010a0/?vgnextoid=5a01303cb0b32010VgnVCM1000001a01010aRCRD State Site: http://www.dof.ca.gov/FI/SA/OSAE/SPguide.pdf	The Department of Finance also prepares Strategic Planning Guidelines to assist all state agencies in understanding the strategic planning process. After addressing the overview of what planning is, the guidelines provide a framework to help an agency to develop its own strategic plan and to define performance measures that emphasize meaningful results. <i>This is not representation of the State's Medicaid Managed Care Quality Strategy.</i>

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Category	Resource	Contact	Date of Publication / Release	Document Website Location	Description
State Strategic Initiatives	Iowa - Managing For Results - State Initiatives	National Governors Association Center for Best Practices, John Thomasian, Director (202) 624-5300	July 15, 2001	http://www.nga.org/portal/site/nga/menuitem.9123e83a1f6786440ddcbeeb501010a0/?vgnextoid=5a01303cb0b32010VgnVCM1000001a01010aRCRD State Site: http://www.dom.state.ia.us/planning_performance/index.html	The Strategic Planning & Accountability Team of the Department of Management leads performance-based management in Iowa. The State's governance system has recently been enhanced by the passage of the Accountable Government Act. Its major components include: enterprise and agency strategic planning, annual performance plans and targets, measures, results-oriented budgeting, performance reporting and audits, performance contracting, and the use of ROI and other cost-benefit tools. <i>This does not address the State's Medicaid Managed Care Quality Strategy.</i>
State Strategic Initiatives	Maine - Managing For Results - State Initiatives	National Governors Association Center for Best Practices, John Thomasian, Director (202) 624-5300	July 15, 2001	http://www.nga.org/portal/site/nga/menuitem.9123e83a1f6786440ddcbeeb501010a0/?vgnextoid=5a01303cb0b32010VgnVCM1000001a01010aRCRD State Site: http://www.mainemarks.org/	In 1996, the Maine Legislature enacted P.L. 1995, Chapter 705 (as amended) which mandated that state government move toward a performance-based budget system. The requirements of Maine's performance budgeting law requires that all State agencies develop strategic plans that focus on outcomes consistent with statutory mandates (biennially updated) and budget proposals consistent with strategic plans. <i>This does not address the State's Medicaid Managed Care Quality Strategy.</i>

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State Strategic Initiatives	<u>Minnesota</u> - Managing For Results - State Initiatives	National Governors Association Center for Best Practices, John Thomasian, Director (202) 624-5300	July 15, 2001	http://www.nga.org/portal/site/nga/menuitem.9123e83a1f6786440ddcbeeb501010a0/?vgnextoid=5a01303cb0b32010VgnVCM1000001a01010aRCRD State Site: http://www.mnplan.state.mn.us/mm/goal.html#People	The Governor asked that each Department Commissioner select a few goals from their department's strategic plan, and develop key results indicators that would be most meaningful to citizens. The results targeted on this site inform the ongoing management of state government. Also, FY 04-05 biennial budget proposals will be evaluated in part based on their expected impact on these and other results. Performance indicators are continually being evaluated with the help of online feedback from citizens.

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Category	Resource	Contact	Date of Publication / Release	Document Website Location	Description
State Strategic Initiatives	Texas - Managing For Results - State Initiatives	National Governors Association Center for Best Practices, John Thomasian, Director (202) 624-5300	July 15, 2001	http://www.nga.org/portal/site/nga/menuitem.9123e83a1f6786440ddcbeeb501010a0/?vgnnextoid=5a01303cb0b32010VgnVCM1000001a01010aRCRD State Site: http://www.lbb.state.tx.us/Strategic_Plans/Strategic_PlansInstructions_forFY2007-2011.pdf	Strategic planning is a long-term, iterative, and future oriented process of assessment, goal setting, and decision-making that maps an explicit path between the present and a vision of the future. It includes a multiyear view of objectives and strategies for the accomplishment of agency goals. Clearly defined outcomes and outputs provide feedback that leads to program performance that influences future planning, resource allocation, and operating decisions. The strategic planning process incorporates and sets direction for all agency operations. A Strategic Plan is a formal document that communicates an agency's goals, directions, and outcomes to various audiences, including the Governor and the Legislature, client and constituency groups, the general public, and the agency's employees. <i>This document is not the States Medicaid Managed Care Quality Strategy.</i>

State Quality Assessment and Improvement Strategic Planning Examples and Tools

Category	Resource	Contact	Date of Publication / Release	Document Website Location	Description
State Strategic Initiatives	Utah - Managing For Results - State Initiatives	National Governors Association Center for Best Practices, John Thomasian, Director (202) 624-5300	July 15, 2001	http://www.nga.org/portal/site/nga/menuitem.9123e83a1f6786440ddcbeeb501010a0/?vgnnextoid=5a01303cb0b32010VgnVCM1000001a01010aRCRD State Site: http://www.le.utah.gov/documents/utahtomorrow/utahtomorrow.pdf	Utah Tomorrow is a statewide strategic planning and performance measurement effort that is a joint legislative/executive undertaking. Goals, objectives, and performance measures in ten key policy areas were presented, discussed, and adopted by the Utah Tomorrow Strategic Planning Committee, setting in place standards for agencies, local governments, the Judiciary, and the Legislature to use in policy and planning activities. <i>This document is not the States Medicaid Managed Care Quality Strategy.</i>
State Strategic Initiatives	Virginia - Managing For Results - State Initiatives	National Governors Association Center for Best Practices, John Thomasian, Director (202) 624-5300	July 15, 2001	http://www.nga.org/portal/site/nga/menuitem.9123e83a1f6786440ddcbeeb501010a0/?vgnnextoid=5a01303cb0b32010VgnVCM1000001a01010aRCRD State Site: http://dpb.virginia.gov/sp/Overview.cfm	Virginia's current Managing for Results System has been operational since 1995. It is comprised of four, linked processes: strategic planning, performance measurement, program evaluation, and performance budgeting, and it is overseen by the Department of Planning and Budget. <i>This document is not the States Medicaid Managed Care Quality Strategy.</i>

State Quality Assessment and Improvement Strategic Planning Examples and Tools

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State Strategic Initiatives	West Virginia - Managing For Results - State Initiatives	National Governors Association Center for Best Practices, John Thomasian, Director (202) 624-5300	July 15, 2001	http://www.nga.org/portal/site/nga/menuitem.9123e83a1f6786440ddcbeeb501010a0/?vgnextoid=5a01303cb0b32010VgnVCM1000001a01010aRCRD State Site: http://www.prevnet.org/outcomes/Indicator_List_1.asp	West Virginia's <u>Governor's Cabinet on Children and Families</u> has selected six desirable OUTCOMES for West Virginia's children and families. Through a partnership with the West Virginia Prevention Resource Center, the Cabinet is monitoring thirty-seven INDICATORS of child and family well-being related to the six outcomes. One outcome is specific to health – and includes 10 indicators. <i>This document is not the States Medicaid Managed Care Quality Strategy.</i>

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Other Tools for Strategy Development	What Are the Advantages and Limitations of Different Quality and Safety Tools for Health Care?	World Health Organization, WHO Regional Office for Europe (Denmark) Health Evidence Network, Anca Dumitrescu, Director, Division of Information, Evidence and Communication hen@euro.who.int	October 2005	http://www.euro.who.int/HEN/Syntheses/QualityTools/20051006_4	This Health Evidence Network report discusses the advantages and limitations of different quality and safety tools for health care continuous quality improvement. Such methods, frameworks, programs, and systems are necessary components for diagnosis, decision making, and intervention.

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Other Tools for Strategy Development	National Guideline Clearinghouse™ (NGC)	AHRQ, Center for Outcomes and Evidence Mary Nix, Project Officer info@guideline.gov	Various dates	www.guidelines.gov	The National Guideline Clearinghouse™ (NGC) is an initiative of the Agency for Healthcare Research and Quality (AHRQ), U.S. Department of Health and Human Services to provide a public resource for evidence-based clinical practice guidelines. NGC was originally created by AHRQ in partnership with the American Medical Association and the American Association of Health Plans (now America's Health Insurance Plans [AHIP])
Other Tools for Strategy Development	Using External Quality Review Organizations to Improve the Quality of Preventive and Developmental Services for Children	The Commonwealth Fund 1 East 75th Street, New York, NY 10021 Phone: 212.606.3800 Fax: 212.606.3500 E-mail: cmwf@cmwf.org	June 2005	http://www.cmwf.org/publications/publications_show.htm?doc_id=278078	This study provides state Medicaid programs, managed care organizations, EQROs, and other child health professionals with strategies for using EQROs to enhance the quality of preventive and developmental services for young children. The authors' findings indicate that only a few states are now using EQROs to assess preventive and developmental services, but more states could do so if a key stakeholder elects to champion the issue and if state staff and EQROs have the relevant knowledge base.

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Other Tools for Strategy Development	State Resources for Selected Measures from the 2004 <i>National Healthcare Quality Report</i>	AHRQ, Vivian Coates QualityTools Project Director info@qualitytools.ahrq.gov	Current	http://www.qualitytools.ahrq.gov/ State Snapshots link: http://www.qualitytools.ahrq.gov/qualityreport/2005/state/summary/intro.aspx	<p>These resources have been developed using data from AHRQ's 2004 <i>National Healthcare Quality Report</i>. This report, mandated by Congress and published annually by AHRQ, is based on a detailed analysis of measures designed to help track health care quality across the Nation. It includes State-level statistics for around 100 of these measures. The data provided in the State resources are presented in three different formats:</p> <ul style="list-style-type: none"> • State Rankings on 14 Selected Measures • State Summary Tables • State Snapshots

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Other Tools for Strategy Development	Evidence-based Practice Centers (EPC) Program website	AHRQ Kenneth Fink, M.D., Director, EPC Program Center for Outcomes and Evidence (301) 427-1617 KFink@ahrq.gov	current	http://www.ahrq.gov/clinical/epcix.htm	Under the Evidence-based Practice Centers (EPC) Program of the Agency for Healthcare Research and Quality, institutions in the United States and Canada review all relevant scientific literature on clinical, behavioral, and organization and financing topics to produce evidence reports and technology assessments. These reports are used for informing and developing coverage decisions, quality measures, educational materials and tools, guidelines, and research agendas. In the area of Health Care Services, the EPCs examine topics related to Financing and Economic Incentives, Financing and Economic Incentives, and Quality Improvement and Patient Safety.

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Other Tools for Strategy Development	Business Case for Quality in Medicaid Managed Care	CHCS Best Clinical and Administrative Practices Initiative – due to end Dec 2006	June 2004	http://www.chcs.org/info-url_nocat3961/info-url_nocat_show.htm?doc_id=206435	With Medicaid costs escalating on state budgets, the broad system-wide financial, economic, and social benefits of improving the quality of Medicaid services must be documented in order for health care quality to be a priority for states, health plans, and the federal government. CHCS is partnering with researchers at the University of North Carolina School of Public Health to undertake the <i>Business Case for Quality in Medicaid Managed Care</i> . This demonstration project with 10 Medicaid managed care entities is assessing the return on investment for efforts to improve the quality of publicly financed health care.
Other Tools for Strategy Development	Improving Medicaid Quality: Opportunities to Lead	CHCS Biennial Report	June, 2006	http://www.chcs.org/publications3960/publications_show.htm?doc_id=208378	The 2006 Biennial Report provides an at-a-glance view of how CHCS is working with Medicaid stakeholders to enhance health care delivery and, ultimately, the health and quality of life of more than 55 million Americans served under publicly financed care. CHCS's efforts are focused on three key areas: improving quality, reducing disparities, and integrating care.

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Strategy Development for Special Populations	Improvement Partnerships Project Summary	Vermont Child Health Improvement Program, Jaime Gagnon, Project Manager (802) 847-4345	April 2005	http://www.cmwf.org/grants/grants_show.htm?doc_id=248553	This project is sponsored by the University of Vermont in collaboration with the National Initiative for Children's Healthcare Quality and with grant support from the Commonwealth Fund. Its purpose is to promote developmental and preventive services for children by replicating Improvement Partnerships in Vermont and North Carolina to an additional five states/regions. The initial 18-month phase of this activity will involve identifying interested provider groups, identifying an institutional home for the project, engaging interested partners, convening these groups, identifying sources of infrastructure and project funding support, and developing a specific project.
Strategy Development for Special Populations	Children's Healthcare Quality Toolbox	AHRQ	current	http://www.ahrq.gov/choicetoolbox/	This online resource provides concepts, tips, and tools for evaluating the quality of health care for children and answers questions about measuring health care quality in child health programs.

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Strategy Development for Special Populations	Building Improvement Partnerships: Improving Child Health through Regional Collaboration	National Initiative for Children's Health Quality Charles Homer, M.D. (617) 301 4807	Current	http://www.nichq.org/NICHQ/Programs/CollaborativeLearning/ImprovementPartnership.htm	The purpose of this project is to foster the creation of state and regional improvement partnerships to promote child development and preventive services in an effort to optimize healthcare for children in five states/regions. Selected states/regions will form an Improvement Partnership, plan and implement an initial project focusing on developmental or preventive services for children under five.
Strategy Development for Specific Services	Home and Community-Based Services: Community Living Exchange Collaborative Clearinghouse website	CMS, Disabled and Elderly Health Programs Group, Division of Benefits, Coverage, and Payment Susie Bosstick (410) 786-1301	Current	http://www.hcbs.org/	This site assists states and other entities in building systems that provide services and supports that reflect the needs and preferences of individuals of all ages with disabilities. This site is intended to facilitate sharing information, tools, and practical resources across the many states and local entities that are reexamining and redesigning how they provide supports.

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Strategy Development for Specific Services	Guide to Clinical Preventive Services, 3rd Edition: Periodic Updates	AHRQ, Center for Primary Care, Prevention, & Clinical Partnerships, Miller, Dr.P.H., Project Coordinator (301) 427-1585 TMiller@ahrq.gov	Not indicated	http://www.ahrq.gov/clinic/gcpspu.htm	<p>The U.S. Preventive Services Task Force (USPSTF) was convened by the Public Health Service to rigorously evaluate clinical research in order to assess the merits of preventive measures, including screening tests, counseling, and preventive medication.</p> <p>The 3rd Edition of the <i>Guide to Clinical Preventive Services</i> is based on U.S. Preventive Services Task Force (USPSTF) recommendations from 2001 to 2004. The Guide updates some recommendations from the 2nd Edition and evaluates additional new topics. Guidelines for many conditions are provided under three major categories: Screening, Counseling, Preventive Medication.</p>

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Quality Measurement	Quality Mall website	Val Bradley, Human Services Research Institute (HSRI) (617) 876-0426		http://www.qualitymall.org/directory/store1.asp?storeid=7	<p>The Quality Assurance and Improvement section of this website features various methods and systems for measuring and improving quality in agencies and state systems. It includes</p> <ul style="list-style-type: none"> ■ <u>Monitoring Health and Safety</u> 23 products State programs, reports, and innovative practices that exemplify a systemic perspective on health and safety monitoring. ■ <u>State Performance Indicators</u> 13 products State level data used to monitor progress, assess problems, and suggest policy directions. ■ <u>State Quality Assurance</u> 18 products Information about innovative methods for establishing quality assurance programs based on person-centered outcomes. ■ <u>State Quality Improvement</u> 15 products Exemplary State quality improvement programs and processes.